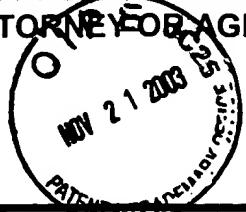


REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT 	Application Number	09/836,850
	Filing Date	04/16/01
	First Named Inventor	Scott D. Miles
	Group Art Unit	
	Examiner Name	
	Attorney Docket Number	0905.ZEVX.CI

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TECHNOLOGY CENTER R3700

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

We hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are:

Applicant's Request

- ☐ The correspondence address is NOT affected by this withdrawal.
- ☒ Change the correspondence address and direct all future correspondence to :


CORRESPONDENCE ADDRESS

☐ Customer Number →
OR
Place Customer Number Bar Code Label Here

<input checked="" type="checkbox"/> Firm or Individual Name	Randall B. Bateman				
Address	P.O. BOX 1319				
Address					
City	SALT LAKE CITY	State	UT	Zip Code	84110-1319
Country	USA				
Telephone		Fax			

- ☒ This request is made on behalf of:
- ☒ all the attorneys/agents of record, except for Randall B. Bateman
 - ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
 - ☐ The attorneys/agents associated with Customer Number _____

This request is enclosed in triplicate (including any attachments).

Name	Frank W. Compagni
Signature	
Date	11-18-03

NOTE: Withdrawal is effective when approved rather than when received.
Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.